

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	SF		11-29-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	ZA	1120	12-7-01
RESPONSE FORMALITY REVIEW	MTB	454	4/4/02

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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21-21-02